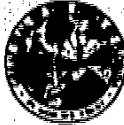


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P35802 (8)
1. Corporation Name
CURRY FORD PARTNERS, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/07/1991	3a. Date of Last Report 05/01/1994
4. FEI Number 36-3728557	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21 2355 Waukegan Road Suite, Apt. #, etc. A200 City & State Bannockburn, IL Zip 60015 Country	2a. Mailing Address 26 2355 Waukegan Rd. Suite, Apt. #, etc. A200 City & State Bannockburn, IL Zip 60015 Country
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9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST. STE. #105 TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number Is Not Acceptable) B3 B4 City B5 Zip Code FL
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. See Attached OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP PO MEADOR, THOMAS E. 4849 GOLF ROAD SKOKIE IL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP C/P CEO/D 2355 Waukegan Road, Suite A200 Bannockburn, IL 60015
TITLE NAME STREET ADDRESS CITY - ST - ZIP SVP O'HANLON, MICHAEL J. 4849 GOLF ROAD SKOKIE IL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP Senior V/CFO/T/Asst. S/D Brian D. Parker 2355 Waukegan Road Bannockburn, IL 60015
TITLE NAME STREET ADDRESS CITY - ST - ZIP VS OGLE, JERRY M. 4849 GOLF ROAD SKOKIE IL 60077	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP Executive V 2355 Waukegan Road, Suite A200 Bannockburn, Illinois 60015
TITLE NAME STREET ADDRESS CITY - ST - ZIP EVP WOOD, ALLAN 4849 GOLF ROAD SKOKIE IL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP Senior V Daniel A. Duhig 2355 Waukegan Rd., Suite A200 Bannockburn, IL 60015
TITLE NAME STREET ADDRESS CITY - ST - ZIP SVP DARRAGH, ALEX 4849 GOLF ROAD SKOKIE IL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP Senior V Daniel A. Duhig 2355 Waukegan Rd., Suite A200 Bannockburn, IL 60015

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry M. Ogle Jerry M. Ogle 4-21-95 (788)677-2900
Signature and Typed or Printed Name of Signing Officer or Director Vice Pres. & Sec. Date

P35802

ADDITIONAL OFFICERS

Senior Vice President
Senior Vice President

Josette Goldberg
Alan Lieberman

The address of record for the above officers is:

Bannockburn Lake Office Plaza
2355 Waukegan Road
Suite A200
Bannockburn, Illinois 60015